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PTO/SB/21 (12-97)

Approved for use through 9/30/00. OMB 0651-0031

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/779,076	
	Filing Date	02-07-2001	
	First Named Inventor	ROCHELLE	
	Group Art Unit	2632	
	Examiner Name		
Total Number of Pages in This Submission	13	Attorney Docket Number	26053.00

ENCLOSURES (*check all that apply*)

- | | | |
|---|---|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form | <input checked="" type="checkbox"/> Assignment Papers
<i>(for an Application)</i> | <input type="checkbox"/> After Allowance Communication to Group |
| <input checked="" type="checkbox"/> Fee Attached | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input type="checkbox"/> Amendment / Response | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Group
<i>(Appeal Notice, Brief, Reply Brief)</i> |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> To Convert a Provisional Application | <input type="checkbox"/> Status Letter |
| <input type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input checked="" type="checkbox"/> Additional Enclosure(s)
<i>(please identify below):</i> |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Terminal Disclaimer | <div style="border: 1px solid black; padding: 5px;">Declaration Modified to Include
Power of Attorney (4)
Return Receipt Postcard
Check \$ 65.00
Check \$ 40.00</div> |
| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> Small Entity Statement | |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> Request for Refund | |
| <input checked="" type="checkbox"/> Response to Missing Parts/ Incomplete Application | <input type="checkbox"/> Remarks | |
| <input checked="" type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	J. Kenneth Hoffmeister, Registration Number 43,675
Signature	
Date	05/15/2001

CERTIFICATE OF EXPRESS MAILING

EL629934867US

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail Post Office to Addressee in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: 5/15/01

Typed or printed name Sheri A. Webb

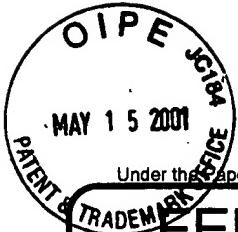
Signature

Sheri A. Webb

Date _____

5/5/01

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be send to the Chief Information Officer Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$)

105

Complete if Known

Application Number	09/779,076
Filing Date	02-07-2001
First Named Inventor	ROCHELLE
Examiner Name	
Group Art Unit	2632
Attorney Docket No.	26053.00

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number	16-1910
Deposit Account Name	Pitts & Brittian, P.C.

 Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

 Applicant claims small entity status. See 37 CFR 1.27

2. Payment Enclosed:

 Check Credit card Money Order Other

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)	Fee Description	
105	130 205	65 Surcharge - late filing fee or oath	65
127	50 227	25 Surcharge - late provisional filing fee or cover sheet	
139	130 139	130 Non-English specification	
147	2,520 147	2,520 For filing a request for ex parte reexamination	
112	920* 112	920* Requesting publication of SIR prior to Examiner action	
113	1,840* 113	1,840* Requesting publication of SIR after Examiner action	
115	110 215	55 Extension for reply within first month	
116	390 216	195 Extension for reply within second month	
117	890 217	445 Extension for reply within third month	
118	1,390 218	695 Extension for reply within fourth month	
128	1,890 228	945 Extension for reply within fifth month	
119	310 219	155 Notice of Appeal	
120	310 220	155 Filing a brief in support of an appeal	
121	270 221	135 Request for oral hearing	
138	1,510 138	1,510 Petition to institute a public use proceeding	
140	110 240	55 Petition to revive - unavoidable	
141	1,240 241	620 Petition to revive - unintentional	
142	1,240 242	620 Utility issue fee (or reissue)	
143	440 243	220 Design issue fee	
144	600 244	300 Plant issue fee	
122	130 122	130 Petitions to the Commissioner	
123	50 123	50 Petitions related to provisional applications	
126	240 126	240 Submission of Information Disclosure Stmt	
581	40 581	40 Recording each patent assignment per property (times number of properties)	40
146	710 246	355 Filing a submission after final rejection (37 CFR 1.129(a))	
149	710 249	355 For each additional invention to be examined (37 CFR 1.129(b))	
179	710 279	355 Request for Continued Examination (RCE)	
169	900 269	900 Request for expedited examination of a design application	
Other fee (specify) _____			

SUBTOTAL(1) (\$)

0

2. EXTRA CLAIM FEES

Total Claims	28	-20** =	8	X	9	=	
Independent Claims	4	3** =	1	X	40	=	
Multiple Dependent							

Large Entity	Small Entity	Fee Description
Fee Code (\$)	Fee Code (\$)	Fee Description
103	18 203	9 Claims in excess of 20
102	80 202	40 Independent claims in excess of 3
104	270 204	135 Multiple dependent claim, if not paid
109	80 209	40 ** Reissue independent claims over original patent
110	18 210	9 ** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

0

**or number previously paid, if greater; For Reissues, see above

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

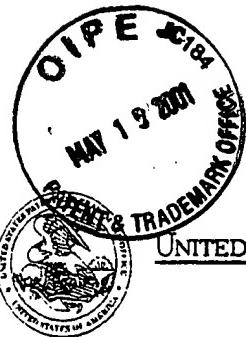
105

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	J. Kenneth Hoffmeister	Registration No. (Attorney/Agent)	43,675	Telephone	(865) 584-0105
Signature	<i>J. Kenneth Hoffmeister</i>	Date	05/15/2001		

WARNING! Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.



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WASHINGTON, D.C. 20231
www.uspto.gov

APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
09/779,076	02/07/2001	James M. Rochelle	26053.00

22465
PITTS AND BRITTIAN P C
P O BOX 51295
KNOXVILLE, TN 37950-1295

CONFIRMATION NO. 7830

FORMALITIES LETTER



"OC000000005879335"

Date Mailed: 03/19/2001

NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

FILED UNDER 37 CFR 1.53(b)

Filing Date Granted

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given TWO MONTHS from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The signature of the following inventor(s) is missing from the oath or declaration:
David M. Binkley, Lloyd G. Clonts, Brian K. Swann and Rungeit Sangsingkeow
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(e) of \$65 for a small entity in compliance with 37 CFR 1.27, must be submitted with the missing items identified in this letter.
- The balance due by applicant is \$ 65.

The application is informal since it does not comply with the regulations for the reason(s) indicated below. Applicant is given TWO MONTHS from the date of this Notice within which to correct the informalities indicated below.

The required item(s) identified below must be timely submitted to avoid abandonment:

- Substitute drawings in compliance with 37 CFR 1.84 because:
 - drawing sheets do not have the appropriate margin(s) (see 37 CFR 1.84(g)). Each sheet must include a top margin of at least 2.5 cm. (1 inch), a left side margin of at least 2.5 cm. (1 inch), a right side margin of at least 1.5 cm. (5/8 inch), and a bottom margin of at least 1.0 cm. (3/8 inch);

A copy of this notice MUST be returned with the reply.

See also
Customer Service Center

Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE